AMENDED IN ASSEMBLY AUGUST 22, 2014 AMENDED IN ASSEMBLY MAY 29, 2014 AMENDED IN SENATE JANUARY 9, 2014 AMENDED IN SENATE JANUARY 6, 2014

SENATE BILL

No. 500

Introduced by Senator Lieu

(Principal coauthors: Assembly Members Gray and Pan)

February 21, 2013

An act to amend Section 2241.6 of the Business and Professions Code, relating to healing arts. An act to amend Section 14124.20 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

SB 500, as amended, Lieu. Medical practice: pain management. Drug Medi-Cal.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Existing law authorizes the department to adopt regulations for the certification of each provider in the Medi-Cal program. Existing law also provides for the Medi-Cal Drug Treatment Program (Drug Medi-Cal), under which the department is authorized to enter into contracts with counties for various drug treatment services to Medi-Cal recipients, or is required to directly arrange for these services if a county elects not to do so.

This bill would require the department, in coordination with the counties, to ensure the implementation of procedures, for purposes of

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the Drug Medi-Cal program, to routinely identify and initiate recovery efforts for payments that the county authorizes either (1) between the effective date of a provider's decertification and the date the county receives information regarding the decertification or (2) after a beneficiary's date of death.

Existing law establishes the Medical Board of California within the Department of Consumer Affairs. Existing law, among other things, required the board to develop standards before June 1, 2002, to ensure the competent review in cases concerning the management, including, but not limited to, the undertreatment, undermedication, and overmedication of a patient's pain.

This bill would require the board, on or before July 1, 2015, to update those standards. The bill would require the board to convene a task force to develop and recommend the updated standards to the board. The bill would also require the board to update those standards on or before July 1 each 5th year thereafter.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 14124.20 of the Welfare and Institutions 2 Code is amended to read:
- 3 14124.20. (a) The department may enter into a Drug Medi-Cal Treatment Program contract with each county for the provision of 5 providing alcohol and drug use services within the county service 6 area.
 - (b) A county that has multiple contracts with the department for the provision of providing multiple alcohol and drug use services may enter into a single contract with the department.
 - (c) The department shall, in coordination with the counties, ensure the implementation of procedures to routinely identify and initiate recovery efforts for payments that the county authorizes either (1) between the effective date of a provider's decertification and the date the county receives information regarding the decertification or (2) after the beneficiary's date of death.
- 16 SECTION 1. Section 2241.6 of the Business and Professions Code is amended to read:
- 18 2241.6. (a) (1) The board shall develop standards before June 19 1, 2002, to ensure the competent review in cases concerning the

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management, including, but not limited to, the undertreatment, undermedication, and overmedication of a patient's pain.

- (2) The board may consult with entities such as the American Pain Society, the American Academy of Pain Medicine, the California Society of Anesthesiologists, the California Chapter of the American College of Emergency Physicians, the Osteopathic Medical Board of California, and any other medical entity specializing in pain control therapies to develop the standards utilizing, to the extent they are applicable, current authoritative elinical practice guidelines.
- (b) The board shall update the standards adopted pursuant to subdivision (a) on or before July 1, 2015, and on or before July 1 each fifth year thereafter.
- (c) The board shall convene a task force to develop and recommend the updated standards to the board. The task force, in developing the updated standards, may consult with the entities specified in paragraph (2) of subdivision (a), the American Cancer Society, a physician who treats or evaluates patients as part of the workers' compensation system, an osteopathic physician, a physician assistant, and specialists in pharmacology and addiction medicine.